PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10000407

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			jet .					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			(11 minus 20=		• 91			X\$ 9=	<u>.</u>	OR	X\$18=	1638
INDEPENDENT CLAIMS			. 6 minus 3 =		3			X42=		OR	X84=	252
MULTIPLE DEPENDENT CLAIM PRESENT								+140=	_	OR	+280=	
* If the difference in column 1 is less than zero					r "0" in c	olumn 2		TOTAL		OR	TOTAL	2630
CLAIMS AS AMENDED - PART II								. '		,	OTHER	
<u>6</u>	1305	(Column 1)		(Colu		(Column 3)	• ,	SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 109	Minus	**	1	= 0		X\$ 9=		OR	X\$18=	
	Independent	· 6	Minus	*** (<i>O</i>	<u> </u>		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	I CLAIM		ָ	+140=.		OR	+280=	
								TOTAL ADDIT, FEE	·	OR	TOTAL ADDIT, FEE	
	•)	ADDII. (EE)									
AMENDMENT B	-	(Column 1) CLAIMS REMAINING		HIG	mn 2) HEST MBER	PRESENT]		ADDI-			ADDI-
		AFTER AMENDMENT		PREVI	OUSLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	44		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> -</u>		X42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						j	+140=		OR	+280=	
								TOTAL		OR	TOTAL	
									L	10	ADDIT. FEE	
_		(Column 1) CLAIMS			ımn 2) HEST	(Column 3	ነ ፣		ADDI	I		ADDI-
AMENDMENT C		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	with		=	┇	X42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=			1,000	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nun	mber Previously Pa	aid For" (Total o	r Indepen	dent) is the	e highest numb	er fo	ound in the ap	propriate bo	x in co	olumn 1.	
i										_		E COMMEDCE